PHARMACARE NEWSLETTER

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This newsletter provides information on the Pharmacare program for British Columbia's community pharmacists. Please circulate among dispensing staff.

Pharmacare on the Web:
www.healthservices.gov.bc.ca/pharme

Pharmacare Audit – Days' Supply Edit Enhancement

On November 28, 2002, Pharmacare introduced a PharmaNet enhancement and more stringent audit procedures to ensure prescriptions are not filled too soon. (Refer to PharmaNet Bulletin 02-007 and Pharmacare Newsletter 02-10).

Pharmacare Audit will perform weekly volume monitoring of the days' supply edit in conjunction with pharmacy use of the UF intervention code. Effective monitoring is dependent on accurate entry by pharmacists of the days' supply information. Even though it is recognized that data entry errors for previous claims may have occurred, explanation and documentation of any claim questioned by Pharmacare Audit will be required.

When the UF intervention code is used, Pharmacare requires pharmacists to document the use, and reason for use, in a manner accessible for audit purposes. As this documentation will be critical in resolving issues arising from audits, attention to detail (such as including the authority for the claim as well as the explanation for the use of the UF code) will assist in the process. If an onsite audit is conducted and the documentation regarding the use of the UF code has been recorded on the pharmacy's computer system, the auditors will require access to the computer system.

Initially, two approaches will be used to request explanations and documentation from the selected pharmacies that generate excessive volumes of UF codes:

- the pharmacy may be telephoned, or
- the pharmacy may receive a letter from Pharmacare Audit.

When indicated, onsite audits will be performed in which case standard notification procedures will be followed (see the Pharmacare/PharmaNet Policy and Procedures Manual, Section 6.7.3).

Restricted Claimants Program

Pharmacare's Restricted Claimants Program has been in place since the 1970s. It restricts payment of prescription drugs for patients who appear to have difficulty managing their prescription drugs.

The program works this way:

- The patient's Pharmacare drug coverage is restricted to one pharmacy and one doctor (plus specialists).
- If the patient tries to fill a prescription at a different pharmacy or if a different doctor has written the prescription, Pharmacare will not pay for the prescription.

The Pharmacist, as always applies professional judgement in determining whether or not to fill the prescription.

In emergency circumstances, Pharmacare will make one-day changes in the doctor or pharmacy. Exceptions are made only if the patient is unable to see their own doctor or get to their own pharmacy and if not filling the prescription could result in serious harm to the patient.

When a Pharmacist calls to request a special exception, they will be asked a series of questions which Pharmacare staff use to determine if financial coverage should be provided. Staff are expected to assess:

a) If there is a sufficiently good reason why the patient is unable to get to their own doctor or pharmacy (i.e., doctor on vacation, pharmacy is closed), and

b) If there is sufficiently good reason why this prescription must be filled at this time (i.e., there is a serious health consideration rather than simply a request for an early refill).

Replacement of lost or stolen medications is not covered for patients on this program.

All special exceptions must be obtained before dispensing as there is no retroactive coverage.

If you have any questions regarding the restricted Claimant program, please feel free to contact a Restricted Claimant Clerk or the Manager of Plan Operations.

Humalog (Insulin Lispro)

These products are reimbursed based on maximum allowable cost and remain as follows:

DIN	MAN	DRUG NAME	MAXIMUM ALLOWABLE COST
2229704	LIL	Humalog 100 u/ml Vial	$1.9625
2229705	LIL	Humalog Cartridge 100 u/ml	$1.9625

LCA Update

Please note the corrections to the LCA/RDP Booklet, effective October 15, 2002.

DIN	MAN	DRUG NAME	CORRECTION (F = Full or P = Partial)	LCA PRICE
754595	APX	Apo-Bisacodyl Sup 10mg (Plan PC – Palliative Care only)	Missed in publication: P	$0.3597
545023	APX	Apo-Bisacodyl Tab 5mg (Plan PC – Palliative Care only)	Missed in publication: P	$0.0245
839183	APX	Apo-Diclo Tab 50mg	Correction: P to P*	
312800	APX	Apo-Hydro Tab 50mg	Another DIN was discontinued, therefore: P to F	
2217503	APX	Apo-Lisinopril Tab 10mg	Correction: P to P*	
2217511	APX	Apo-Lisinopril Tab 20mg	Correction: P to P*	
692700	APX	Apo-Theo LA SR Tab 300mg	Missed in publication: P	$0.1455
545058	APX	Apo-Trihex Tab 2mg	Missed in publication: F	
461733	ICN	Carbolith Cap 150mg	Missed in publication: P	$0.0622

LCA Update (cont)

DIN	MAN	DRUG NAME	CORRECTION (F = Full or P = Partial)	LCA PRICE
236683	ICN	Carbolith Cap 300mg	Missed in publication: P	$0.0641
2242002	ABB	Demerol 50mg/ml	Missed in publication: F	
2242003	ABB	Demerol 50mg/ml	Missed in publication: P	$0.2119
30783	UPJ	Depo Testosterone Inj 100mg/ml	Missed in publication: P	$1.8300
254142	ICN	Dulcolax ECT 5mg (Plan PC – Palliative Care only)	Missed in publication: P	$0.0245
3875	BOE	Dulcolax Sup 10mg (Plan PC – Palliative Care only)	Missed in publication: P	$0.3597
716812	TAR	Fluoderm Ointment .025%	Missed in publication: F	
2088398	GPM	Gen-Baclofen Tab 10mg	Missed in publication: P	$0.2746
2088401	GPM	Gen-Baclofen Tab 20mg	Correction: F to P	$0.5789
1946307	GPM	Gen-Nifedipine Cap 10mg	Correction: F to P	$0.1899
2146126	SIL	Hydromorphone HP 50mg/ml	Correction: P to F	
2013231	PFI	Lithane Cap 150mg	Missed in publication: P	$0.0622
406775	PFI	Lithane Cap 300mg	Missed in publication: P	$0.0641
497452	ABB	Meperidine HCL INJ 50mg/ml	Missed in publication: P	$0.2119

LCA Update (cont)

DIN	MAN	DRUG NAME	CORRECTION (F = Full or P = Partial)	LCA PRICE
725765	SIL	Meperidine HCL INJ 50mg/ml USP	Missed in publication: P	$0.2119
1939130	ODN	Niacin Tab 500mg	Missed in publication: F	
557412	VTH	Niacin Tab 500mg	Missed in publication: P	$0.0339
294950	ICN	Niacin Tab 500mg	Missed in publication: P	$0.0339
21482	NOP	Novo-Hydrazide Tab 50mg	Correction: F to P	$0.0685
2243314	NOP	Novo-Naproxen EC Tab 500mg	Correction: P to P*	
756830	NOP	Novo-Nifedin Cap 10mg	Missed in publication: F	
2230087	NOP	Novo-Theophyl SR Tab 300mg	Missed in publication: F	
2020696	NXP	Nu-Ibuprofen Tab 300mg	Correction: F to P	$0.0295
587273	PMS	PMS-Bisacodyl Tab 5mg (Plan PC – Palliative Care only)	Missed in publication: F	
582883	PMS	PMS-Bisacodyl Sup 10mg	Missed in publication: F	
2216132	PMS	PMS-Lithium Carbonate Cap 150mg	Missed in publication: F	
2216140	PMS	PMS-Lithium Carbonate Cap 300mg	Missed in publication: F	
839396	MSD	Prinivil Tab 10mg	Correction: P* to P	$0.7892

LCA Update (cont)

DIN	MAN	DRUG NAME	CORRECTION (F = Full or P = Partial)	LCA PRICE
839418	MSD	Prinivil Tab 20mg	Correction P* to P	$0.9471
556742	BRI	Quibron T SR Tab 300mg	Missed in publication P	$0.1455
1977563	CYI	Sterile Triamcinolone Acetonide Sus 40mg/ml	Missed in publication P	$5.6440
2162512	MEI	Synalar Ointment .025%	Missed in publication P	$0.1381
1977601	CYI	Testosterone Cypionate Inj 100mg/ml	Missed in publication F	
572802	PDL	Trihexyphen 2 Tab 2mg	Missed in publication P	$.0109
2049376	AZC	Zestril Tab 10mg	Correction P* to P	$0.7892
2049384	AZC	Zestril Tab 20mg	Correction P* to P	$0.9471

Benefits

The following new products have been included as eligible Pharmacare benefits on Plans A, B, C, E and F:

DIN	MAN	DRUG NAME	Short Term	Long Term	Plan G Eligible	Palliative Care Eligible
2245209	APX	Apo-Lamotrigine Tab 100mg	N	Y	N	N
2245210	APX	Apo-Lamotrigine Tab 150mg	N	Y	N	N
2245208	APX	Apo-Lamotrigine Tab 25mg	N	Y	N	N
2245882	APX	Apo-Methazolamide Tab 50mg	N	Y	N	N
2246010	APX	Apo-Metoprolol Tab 25mg	N	Y	N	Y
2244849	RAX	Colistimethate for Inj 150mg	N	Y	N	N
2246284	PMS	PMS-Brimonidine Oph Sol 0.2%	N	Y	N	N

Benefits (cont)

DIN	MAN	DRUG NAME	Short Term	Long Term	Plan G Eligible	Palliative Care Eligible
2243789	RAM	Ratio-IPRA SAL UDV 2.5mg/0.5mg	N	Y	N	Y
2243353	RAM	Ratio-Lamotrigine Tab 100mg	N	Y	N	N
2243352	RAM	Ratio-Lamotrigine Tab 25mg	N	Y	N	N
2245735	SIL	Sab-Sodium Chloride Oph Sol USP 5%	N	Y	N	N
2245456	SIL	Sodium Aurothiomalate Inj BP 10mg/ml	N	Y	N	N
2245457	SIL	Sodium Aurothiomalate Inj BP 25mg/ml	N	Y	N	N
2245458	SIL	Sodium Aurothiomalate Inj BP 50mg/ml	N	Y	N	N

Non benefits

Pharmacare's Drug Benefit Committee recently completed the review of the following products and recommended that these products not be added as benefits under the program

DIN	MAN	DRUG NAME
2244842	APX	**Apo-Flavaxate Tab 200mg**
2245480	PMS	**Pms-Flavoxate Tab 200mg**

LCA Updates

New Drugs Categorized to LCA and/or RDP

The following new products under the Low Cost Alternative Program (LCA) / Reference Drug program (RDP) have been included as eligible Pharmacare benefits on Plans A,B,C,E & F

DIN	MAN	DRUG NAME	FULL/ PARTIAL	LCA/RD P Price	Short Term	Long Term	Plan G Eligible	Eligible for Palliative Care
2244638	APX	Apo-Clobazam Tab 10mg	F		N	Y	N	Y

LCA Updates (cont)

DIN	MAN	DRUG NAME	FULL/ PARTIAL	LCA/RDP Price	Short Term	Long Term	Plan G Eligible	Eligible for Palliative Care
2246082	APX	Apo-Flunarizine Cap 5mg	F		N	Y	N	N
2245231	APX	Apo-Nitrazepam Tab 10mg	P	$0.1446	Y	N	Y	N
2245230	APX	Apo-Nitrazepam Tab 5mg	P	$0.0966	Y	N	Y	N
2245669	APX	Apo-Salvent CFC Free 100mcg	F		N	Y	N	Y
2245698	APX	Apo-Tobramycin Oph Sol USP 0.3%	P	$1.0803	Y	N	N	N
2244814	UNK	Co Temazepam Cap 15mg	P	$0.1127	Y	N	Y	N
2244815	UNK	Co Temazepam Cap 30mg	P	$0.1331	Y	N	Y	N
2245435	NOP	Novo-Nefazodone-5HT2 Tab 100mg	P	$0.5736	N	Y	Y	Y
2245436	NOP	Novo-Nefazodone-5HT2 Tab 150mg	P	$0.5689	N	Y	Y	Y
2245437	NOP	Novo-Nefazodone-5HT2 Tab 200mg	P	$0.6714	N	Y	Y	Y
728187	PMS	PMS-Lorazepam Tab 0.5mg	P	$0.0483	N	Y	Y *	Y
728195	PMS	PMS-Lorazepam Tab 1mg	P	$0.0492	N	Y	Y	Y
728209	PMS	PMS-Lorazepam Tab 2mg	P	$0.0797	N	Y	Y	Y
2246013	PMS	PMS-Lovastatin Tab 20mg	P	$1.4095	N	Y	N	N
2246014	PMS	PMS-Lovastatin Tab 40mg	P	$2.6104	N	Y	N	N

New LCA Categories

Please be advised that the following drugs will be included as New LCA Categories effective January 15, 2003:

New Category (Chemical Name)	DIN	MAN	Brand Name	LCA Status: Full / Partial	LCA Price
Amoxicillin/Clavulin	2243986	APX	Apo-Amoxi Clav 125mg/31.25	F	
	2244646	RAM	Ratio-Amoxi Clav 125 F	F	
	1916882	UNK	Clavulin 125 F Oral Sus	P	$ 0752
Amoxicillin/Clavulin	2243987	APX	Apo-Amoxi Clav 250mg/62.5mg/5ml	F	
	2244647	RAM	Ratio-Amoxi Clav 250 F	F	
	1916874	UNK	Clavulin 250 F Oral Suspension	P	$ 1263
Betamethasone Dipropionate/Salicylic Acid	2245688	RAM	Ratio-Topisalic Lotion 0.05-2%	F	
	578428	SCH	Diprosalic Lotion 0.05-2%	P	$0.3657
Brimondine Tartrate Drops 0.2%	2243026	RAM	Ratio-Brimonidine Drops 0.2%	F	
	2246284	PMS	Pms-Brimonidine Drops 0.2%	P	$2.3975
	2236876	ALL	Alphagan Drops 0.2%	P	$2.3975
Colistimethate Sodium Inj 150mg	2244849	RAX	Colistimethate for Inj 150mg	F	
	476420	PFI	Coly-Mycin M Parenteral 150mg	P	$31.5729
Cyclosporine Solution 100mg/ml	2244324	APX	Apo-Cyclosporine Oral Sol 100mg/ml	F	
	2150697	NVR	Neoral Oral Sol 100mg/ml	P	$3.5808
Dexamethasone Inj 10mg/ml	783900	PMS	PMS-Dexamethasone Sod Phos Inj 10mg/ml	F	
	2204274	OMG	Dexamethasone-Omega 10mg/ml	P	$1.3316
	874582	SIL	Dexamethasone-Sod Phos Inj 10mg/ml	P	$1.3316
Floctafenine Tab 200mg	2244680	APX	Apo-Floctafenine Tab 200mg	F	
	2017628	SAW	Idarac Tab 200mg	P	$0.3014
Floctafenine Tab 400mg	2244681	APX	Apo-Floctafenine Tab 400mg	F	
	2017636	SAW	Idarac Tab 400mg	P	$0.5249
Gold Sodium Thiomalate Inj 10mg/ml	2245456	SIL	Sodium Aurothiomalate Inj 10mg/ml	F	
	1927620	RPR	Myochrysine Inj 10mg/ml	P	$8.4208
Gold Sodium Thiomalate Inj 25mg/ml	2245457	SIL	Sodium Aurothiomalate Inj 25mg/ml	F	
	1927612	RPR	Myochrysine Inj 25mg/ml	P	$10.2164
Gold Sodium Thiomalate Inj 50mg/ml	2245458	SIL	Sodium Aurothiomalate Inj 50mg/ml	F	
	1927604	RPR	Myochrysine Inj 50mg/ml	P	$15.8660

New LCA Categories (cont)

New Category (Chemical Name)	DIN	MAN	Brand Name	LCA Status: Full / Partial	LCA Price
Hydroxyurea Cap 500mg	2242920	GPM	Gen-Hydroxyurea Cap 500mg	F	
	465283	SQU	Hydrea Cap 500mg	P	$1.1767
Iron Dextran Complex 50mg/ml	2205963	LUI	Dexiron Liq IM IV Ampul 50mg/ml	F	
	221780	SIL	Infufer Vial 50mg/ml	P	$14.2711
Lamotrigine Tab 100mg	2243353	RAM	Ratio-Lamotrigine Tab 100mg	F	
	2245208	APX	Apo-Lamotrigine Tab 100mg	F	
	2142104	GOW	Lamictal Tab 100mg	P	$0.9634
Lamotrigine Tab 150mg	2245210	APX	Apo-Lamotrigine Tab 150mg	F	
	2142112	GOW	Lamictal Tab 150mg	P	$1.4451
Lamotrigine Tab 25mg	2243352	RAM	Ratio-Lamotrigine Tab 25mg	F	
	2245208	APX	Apo-Lamotrigine Tab 25mg	F	
	2142082	GOW	Lamictal Tab 25mg	P	$0.2409
Metoclopramide Inj 5mg/ml	2185431	SIL	Metoclopramide HCL Inj 5mg/ml	F	
	2243563	OMG	Metoclopramide Omega Vial 5mg/ml	P	$1.0903
albutamol / Ipratropium Bromide 2.5mg/0.5mg	2243789	RAM	Ratio-IPRA SAL UDV 2.5/0.5mg	F	
	2231675	BOE	Combivent Inhalation Sol 1/0.2mg	P	$0.4266
Sodium Chloride Ophthalmic Solution 5%	2245735	SIL	Sab-Sodium Chloride Oph Sol 5%	F	
	750824	BSH	Muro-128 Solution 5%	P	$0.2941
Sufentanil Citrate Inj 50mcg/ml	2244147	SIL	Sufentanil Citrate Inj 50mcg/ml	F	
	1951319	JAN	Sufenta Inj 50mcg/ml	P	$5.7915
Thiamine HCL 100mg/ml	2243525	CYI	Thiamine HCL Injection USP 100mg/ml	F	
	816078	SIL	Thiamine Chlorhydrate Inj USP 100mg/ml	P	$1.2330

Limited Drug Coverage

The following new products have been included as eligible Pharmacare benefits under the Limited Coverage program on Plans A, B, C, E & F by special authority only (please refer to Website for criteria)

DIN	MAN	Brand Name	Short Term	Long Term
2244324	APX	Apo-Cyclosporine Oral Sol 100mg/ml	N	Y
2245246	APX	Apo-Indapamide Tab 1.25mg	N	Y
2244366	APX	Apo-Mefloquine Tab 250mg	Y	N
2243645	NOP	Novo-Fluconazole Cap 150mg	N	Y
2236979	NOP	Novo-Fluconazole Tab 100mg	N	Y
2236978	NOP	Novo-Fluconazole Tab 50mg	N	Y
2236848	NOP	Novo-Ticlopidine Tab 250mg	N	Y
2243796	JSO	Rabeprazole (Pariet®) Tab 10 mg	No	Y
2246063	SIL	Testosterone Cypionate Inj USP 100mg/ml	N	Y